COTE D’IVOIRE 2018

Travel Information Packet
Cote D’Ivoire Facts

CAPITAL: Yamoussoukro

CURRENCY: West African CFA franc

PRESIDENT: Alassane Ouattara

OFFICIAL LANGUAGE(s): French

GOVERNMENT: Unitary Presidential Republic

POPULATION: 23,740,424

Cote d’Ivoire, also known as the Ivory Coast, is a unitary presidential republic under a parliamentary system. Yamoussoukro is the political capital, while the port city of Abidjan is the largest. Cote d’Ivoire is located in West Africa, bordered by Guinea and Liberia to the West, Burkina Faso and Mali to the North, Ghana to the east, and the Gulf of Guinea to the South.

Money: West African CFA franc

The West African CFA franc is the currency of eight independent states in West Africa: Benin, Burkina Faso, Guinea-Bissau, Ivory Coast, Mali, Niger, Senegal and Togo. CFA is a French abbreviation for African Financial Community. This is related to the Central African franc with an equal exchange rate. Cote d’Ivoire’s currency is closely linked with the Euro.

ONE UNITED STATES DOLLAR IS EQUIVALENT TO ROUGHLY 570 WEST AFRICAN CFA FRANC’S.

$1 USD IS ROUGHLY 570 WEST AFRICAN CFA FRANC

$5 USD IS ROUGHLY 2900 WEST AFRICAN CFA FRANC
The first recorded history of Ivory Coast was by the North African (Berber) merchants who carried out caravan trade via the Sahara in goods such as gold, slaves, and salt among others. The trans-Saharan trade routes on the southern terminals were situated on the edge of the desert. This enabled trade to extend south up to the rain forest. Timbuktu, Gao, and Djenné were the most important terminals and these, later on, became major trade centers and from these, Sudanic empires were developed.

In 1483, The French carried out their first voyage to West Africa and formed their first settlement, Saint Louis, in Senegal. In 1687, a French mission was founded at Assinie near Gold Coast (modern-day Ghana) border. It was in the middle of the 19th century when France firmly established itself in Ivory Coast.

As mentioned above, France fully established itself in the mid-19th century. In the 1840s, France signed a number of treaties with the kings of the Assini and Grand Bassam territories, thus putting their regions under a French protectorate. These became the first French posts in the country, with Grand Bassam as the capital. In 1871, France was defeated in the Franco-Prussian War, forcing it to abandon its colonial desires and withdraw its forces from its trading posts in West Africa. It was in 1886 when the French regained direct control of their trading posts in the region. Towards the end of the 1880s, France had already attained total control over most coastal territories of the country and in 1893 Côte d'Ivoire was made a French colony. France’s main aim was to increase production of exports. To achieve this, they started planting palm oil, cocoa, and coffee plants along the coast. They also enforced forced labor on the locals who were required to work in the settlers’ plantations.

French rule was met with resistance by some of the locals, for instance, Samori Ture, who during the 1880s and 1890s was seizing his neighbors, reinstating slave trade, and establishing the Wassoulou Empire, which broadened to cover areas of...
modern-day Burkina Faso, Mali, Guinea, and Ivory Coast. He was arrested in 1898 and the empire was disbanded soon afterwards.

In 1900, France imposed a head tax to support a public works program in the colony. This was met with a lot of protests from the locals who saw the tax as an infringement of the terms of the signed agreements and the government had to force all native adult men to work for ten days every year without pay as part of their duty to the country. Slave trade was eventually abolished in 1905.

Côte d'Ivoire was a constituent unit of the Federation of French West African from 1904 to 1958 and was an overseas territory and colony under the Third Republic. Regiments from Ivory Coast fought in World War I in France and up to the end of World War II, all administrative affairs in French West Africa were overseen from Paris.

The colonial policy of the French integrated the concepts of association and assimilation. Through the assimilation policy, France was able to extend its customs, laws, institutions, and language to the colony. Association, on the other hand, allowed the locals to preserve their customs but only if they were compatible with the interests of France.

Félix Houphouët-Boigny was Côte d'Ivoire’s father of independence. In 1944, he founded the nation’s first agricultural trade union for native cocoa farmers. He soon became prominent and in a year’s time, he was selected to the French Parliament in Paris. He forged a h2 association with the government of France and was soon nominated as a minister, making him the first African minister in a European government.

The 1956 Overseas Reform Act handed over some powers from Paris to selected regional regimes in French West Africa. The Act also got rid of the remaining voting dissimilarities, and in 1958 Côte d'Ivoire became a sovereign member of the French Community.

The country attained its independence in 1960 with Félix Houphouët-Boigny as the first president. He ruled over the country until his death on December 7, 1993, and he was succeeded by Henri Konan Bédié. Henri was ousted by General Robert Guéï on December 24, 1999, making this the first coup d'état in the country. The Junta governed over the country until 2000 when the General returned the nation to democratic rule. General elections were held in 2001 and when Laurent Gbagbo won, the General refused to acknowledge his win, leading to protests in the country.
The First Ivorian Civil War started on September 19, 2002, and mass murders took place, especially in Abidjan, Korhogo, and Bouaké. France sent some of its troops in 2002 to the county as peacekeepers. In 2003, a reconciliation process began under global auspices. The United Nations also formed the United Nations Operation in Côte d'Ivoire in February 2004 in an attempt to end the war. The war finally ended in 2004 but a lot of damage had already occurred.

In January 2003, rebel leaders and Gbagbo signed treaties establishing a ‘regime of national unity’. The treaty, however, collapsed in November 2004 after the rebels refused to disarm. The government and the rebels signed another peace agreement on 4 March 2007.

In November 2010, presidential elections were held and Alassane Ouattara emerged the winner. Despite his win, it was Gbagbo who was inaugurated after claims emerged that it was him who had won the elections. Ouattara went forward and organized another inauguration and this sparked fears of another civil war.

This presidential election led to the Second Ivorian Civil War which took place from 2010 to 2011. Hundreds of citizens were murdered in the city of Duékoué and in Bloléquin. Military action was taken Against Gbagbo by French and UN forces and on 11th April he was taken into custody. The war left the country in a lot of damage making it difficult for Ouattara to reunite the citizens and reconstruct the economy.

**Government**

The Politics of Ivory Coast takes place in a framework of a presidential representative democratic republic, whereby the President of Ivory Coast is both head of state and head of government, and of a multi-party system. Executive power is exercised by the President and the Government. Legislative power is vested in both the government and parliament.

The capital since 1983 is Yamoussoukro; however, Abidjan remains the administrative center. Most countries maintain their embassies in Abidjan, although some (including the United Kingdom) have closed their missions because of the continuing violence and attacks on Europeans. The population continues to suffer because of an ongoing civil war. International human rights organizations have noted problems with the treatment of captive non-combatants by both sides and the re-emergence of child slavery among workers in cocoa production. Since
the incident on 19 September 2002 (see History of Ivory Coast), a civil war broke out, and the north part of the country has been seized by the rebels, the New Forces (FN). A new presidential election was expected to be held in October 2005. However, this new election could not be held on time due to delay in preparation and had been postponed to October 2006 after an agreement was reached amongst the rival parties. After a long delay, elections were finally held in 2010.

The President of the Ivory Coast is Alassane Ouattara, who assume power in 2010 and is up for reelection in 2020. The current Prime Minister is Amadou Gon Coulibaly who assumed power in 2017.

Economy

Cote D’Ivoire is the largest economy in the Western African Economic and Monetary Union. The country is the world’s largest exporter of cocoa beans. Other cash crops include coffee, and many different varieties of nuts. There is also a large oil industry along with a large natural rubber industry. There is also a substantial mining industry in Cote d’Ivoire, mainly for gold.

Close ties to France sense the mid-20th century, diversification of agricultural exports, and encouragement of foreign investment have been factors in the economic growth of Ivory Coast. In recent years, Ivory Coast has been subject to greater competition and falling prices in the global marketplace for its primary agricultural crops: coffee and cocoa. That, compounded with high internal corruption, makes life difficult for the grower, those exporting into foreign markets, and the labor force, inasmuch as instances of indentured labor have been reported in the country’s cocoa and coffee production in every edition of the U.S. Department of Labor's List of Goods Produced by Child Labor or Forced Labor since 2009.
Culture

The current population estimate is approximately 24.7 million. The largest group is the ethnic Baoule, who comprise over 23 percent of the population. Other significant ethnic groups include the Bete (18 percent), Senufo (15 percent), and Malinke (11 percent). The remaining population is comprised of the Agni, Africans from other countries (mostly Burkinabe and Malians), and non-Africans (primarily French and Lebanese). Of the more than 5 million non-Ivoirian Africans living in Côte d'Ivoire, one-third to one-half are from Burkina Faso; the rest are from Ghana, Guinea, Mali, Nigeria, Benin, Senegal, Liberia, and Mauritania. The country's population growth rate, estimated to increase at 3.8 percent per year, has led to rapid growth and a population of which almost half is under fifteen years of age.

Since their independence, the people of Côte d'Ivoire began to develop a national consciousness. Most of the country's people consider themselves Ivoirians first, and then as members of a particular ethnic group. Yet the concept of a national identity is complex. National boundaries reflect the impact of colonial rule as much as twenty-first century politics, bringing nationalism into conflict with centuries of evolving ethnicity. Each of Côte d'Ivoire's large cultural groups has more members outside the nation than within, resulting in strong cultural and social ties with people in neighboring countries.

Food in Daily Life. In Côte d'Ivoire, grains such as millet, maize (corn), and rice and tubers such as yams and cassava make up most meals. These staples are complemented by legumes such as peas, beans, or peanuts, and smaller quantities of vegetables, oils, spices, and protein—usually meat or fish. Women prepare the grains by grinding them in large wooden bowls with long wooden pestles. For the most part, the family meals are cooked outdoors in ceramic or metal pots on stone hearths. Ivoirian food is very spicy and eaten with the hands. Well-known dishes consist of rice with a pepper-flavored peanut sauce, which is
found in the northern savannah; and fish and fried plantains, served in the coastal regions. The national dish is *foutou* (also spelled *futu*) a thick, heavy paste made of mashed plantains or yams eaten with a spicy sauce or stew made of fish or meat. Because of its ability to keep well, dried, grated cassava, known as *gari*, is a popular food. Côte d'Ivoire's most popular culinary treat, *maquis*, normally features braised chicken and fish in onions and tomatoes. Favorite drinks among the villagers include palm wine and home-brewed beer.

**Religious Beliefs.** The constitution guarantees freedom of religion to all citizens. About 60 percent of the population adhere to indigenous beliefs, 25 percent are Muslim, and about 12 percent are Christian (mostly Roman Catholic). Only about 3 percent follow other religions, including some 100,000 Ivoirians who follow Harrisism, a unique Ivoirian Christian religion that upholds a simple lifestyle. Christianity dominates in the south and the center of the country; Islam is predominant in the north and northeast (although many Muslims have moved south in search of work); and indigenous belief systems are present throughout the land. Both Islam and Christianity have been adapted to indigenous religions in a variety of ways, and many Ivoirians who have converted to Christianity still observe rituals that worship the spirits of their ancestors. Most Ivoirian Muslims are Sunni, following the Maliki version of Islamic law. Sufism is also widespread, infused with indigenous beliefs and practices. Beyond these localized versions of world religions, however, are complex systems of belief and practice that incorporate multiple elements of several religions, including animism, fetishism, and witchcraft. According to most local belief systems, spiritual beings—a creator, ancestral spirits, and spirits associated with places and objects—can influence a person's life and play a large role in religious worship and practice.

**Etiquette.** Often relaxed in character and very polite, Ivoirians always great each other and inquire about a person's health, family, or work. It is considered rude to conduct business without first greeting. Men shake hands with one another; women instead kiss each other three times on the cheeks, alternating sides. At social functions, it is polite to shake hands with everyone upon entering and leaving. Eye contact is usually avoided, particularly between father and child, and it is considered rude to stare. Gift giving is customary, especially to those who are respected in the community.
World Health Organization Statistics

Statistics

Total Population: 24,740,242
Gross National Income per Capita (PPP international $): 2,000
Life Expectancy at Birth M/F (years): 54/56
Probability of dying between 15 and 60 years m/f (per 1000 population): 417/376
Total expenditure on health per capita (Intl $, 2011): 187
Total expenditure on health as % of GDP (2011): 5.7

General Travel Considerations

GENERAL EXPECTATIONS

• Remember that you are a guest in a foreign country, and your American rights do not necessarily apply. Be aware of different laws and customs.
• Be flexible; recognize that despite careful planning the situation on the ground can change quickly, adapt to changes as they occur.
• Be professional; you are representing Project C.U.R.E. as well as the U.S.; do not speak or act in a way which reflects poorly on this organization.

SURVIVAL TIPS

• Always carry your passport with you. Have a photocopy of both your passport and plane ticket in a place apart from the original documents. Leave a passport copy with someone at home.
• Carry with you the daily itinerary, and the list of contact names and phone numbers.
• Be cautious of how much money you carry, when and where you remove it to mitigate the chances of theft or loss. People may be watching!
GENERAL HEALTH AND FOOD SAFETY

- Contaminated food and drink are a major source of illness while traveling. The best way to avoid falling ill is by paying careful attention to your choice of food and beverage.
- As a general rule, if the food is well cooked and hot it is okay to eat. Drink water that has been boiled or purified with iodine, or that comes from a sealed bottle only. Other beverages that are generally safe to drink include hot beverages such as coffee or tea, and carbonated beverages from a sealed can or bottle.
- The best ways to avoid becoming ill are washing your hands with soap and water or use antibacterial gel regularly. Ensure you drink plenty of non-caffeinated, non-alcoholic beverages and get plenty of rest.
- Carry emergency diarrhea medication such as Cipro, which also works on cholera.
- The small sachets of water sold on the street can be consumed, but bottled water is preferable.

CLOTHING

- Dress conservatively. Shorts and jeans are acceptable for non-work hours, and extremely hot weather. SCRUBS AND CLOSED TOED SHOES FOR WORK. One casual business outfit (slacks and a collared shirt or sundress) may be advisable in case of a more formal occasion. All colors of clothing are acceptable, but lighter colors are best.
- Leave your gold and silver jewelry at home.
- Pack light, do not travel with valuables.
- Be certain to bring comfortable, closed toed walking shoes. Tevas, Keenes, Crocs, or waterproof footwear are appropriate. Bring a pair of shower flip-flops. Do not go barefoot; many parasites and infections can be contracted through contact with soil.
- Be prepared for inclement weather. Research the seasonal weather patterns for the country where you will be traveling.
INSECTS

- Insects are responsible for spreading numerous diseases including malaria and, dengue. DEET is the most effective insect repellent against most biting insects.
- Use preventative medications and vaccines recommended by a travel medicine clinic.
- Avoid scented soaps, cologne, perfume, lotions, etc. that can attract insects.
- Use special caution around dusk and dawn when many insects are most active; wear shoes, socks, long pants, and long sleeve shirts if weather permits.

DAILY CARRYING CASE

- Bottle of drinking water
- Personal snacks
- Camera
- Pen or pencil and notepad
- Sunscreen, lip balm, antibacterial hand sanitizer, insect repellant and eye drops.
- Tissues and toilet paper. Bring toilet paper, because it is rarely available.
- Hat, umbrella, light jacket and other appropriate clothing or equipment for inclement weather.

ACCOMMODATIONS

- Cold showers are fairly common; in some clinical facilities they may only have a bathhouse with a dipper and bucket.
- Whether a guesthouse or a hotel, accommodations will always be safe and clean.
- Breakfast, lunch, dinner, and bottled water are included in your program costs. The dining facilities will vary by location. All other snacks or food items are your responsibility. Alcoholic beverages are not included in your program cost.
• All rooms will be dorm style single beds and unless otherwise specified you will have roommates.

**MEDICINES**

• If you plan to bring prescription drugs, be sure they have a pharmacy label and pack them in your carry-on luggage.

• Participants are always advised to carry a small personal first aid kit. Suggestions include Imodium, a z-pack, antibiotic ointment, Band-Aids, aspirin, and antihistamines or decongestants.

• Be sure to bring sunscreen and bug spray.

**INTERNET/CELL PHONE/PDA ACCESS**

Prior to your departure, the Clinic department will ask for the email addresses of those you wish to be notified of your safe arrival. The team leader will send word to the Clinics department once you arrive safely in your host country, and the Clinics department will then notify the individuals you indicated.

Internet access varies widely from country to country, but the Clinics department works to ensure that participants will have some access to the internet during their trip.

**General Cultural Considerations**

It can be difficult to leave the comforts of home and immerse yourself in a foreign environment. It is normal for travelers in developing countries to experience culture shock. Unexpected surprises and circumstances contribute to culture shock, and for this reason, preparation is essential. Volunteers can minimize their frustration by knowing what to expect before they arrive at their destination. The information provided in this packet is meant to help with just that.

**INITIAL SHOCK**

• Common symptoms of culture shock are:
  • Frustration
  • Paranoia
  • Criticism of local people and customs
  • Oversensitivity and overreaction to minor difficulties
• Changes in eating and sleeping habits
• Loss of sense of humor

**ADJUSTMENT**

Gradually, as you orient yourself, you regain confidence. As this happens, your perspective becomes more balanced; you are less critical and more willing to integrate yourself into the culture of the country you are visiting.

**EMOTIONAL ROLLER-COASTER**

It can be shocking to experience poverty for the first time. Positive ways to cope with these feelings are to recognize that you are working to help the community and to discuss your feelings with your team leader and other group members. Regardless of your background, you are a foreigner and most individuals you come in contact with will assume you are wealthy. People may ask you for favors or money, as they may view you as the solution to their health ailments and their poverty. When working in the clinic, patients will likely assume you have clout with the medical providers. Be careful not to promise any assistance you cannot provide during your stay, and never give cash to patients or their families.

**TIPS FOR COPING**

• Travel with a spirit of humility and a desire to meet local people.
• Take care of yourself—eat well, exercise and get sufficient sleep. • Do not take anything too seriously.
• Do not let others irritate you—you have come a long way to learn, to enjoy the experience.
• Cultivate the habit of listening and observing rather than seeing and hearing.
• Be aware of other people’s feelings and try to prevent behaving in a way that others may perceive as offensive. Spend time each day reflecting on your experiences.

**TIME**

In the US, making others wait is usually considered disrespectful and rude. However, most other countries do not have the same attitude towards time and punctuality. While you are abroad, it is your responsibility to be ready for the day at the time appointed by the in-country host, and be aware of how your actions may be delaying or hurrying the group. Although you are expected to be punctual,
you are also expected to be prepared to wait patiently for others, especially individuals from your host country. This is a function of a culture with a more relaxed attitude toward timeliness and schedules; do not be insulted.

**LANGUAGE BARRIERS**

Many of the people you encounter live in rural villages and will not speak or understand English and most people are illiterate. The local staff may speak English and translators will be provided as necessary.

**SOCIAL ETIQUETTE**

Often relaxed in character and very polite, Ivoirians always great each other and inquire about a person's health, family, or work. It is considered rude to conduct business without first greeting. Men shake hands with one another; women instead kiss each other three times on the cheeks, alternating sides. At social functions, it is polite to shake hands with everyone upon entering and leaving. Eye contact is usually avoided, particularly between father and child, and it is considered rude to stare. Gift giving is customary, especially to those who are respected in the community.

**TRUST**

Recognize that when you first arrive at the clinic site, you will be a stranger to the local staff and community. You must work to earn the trust and confidence of those around you, and prove your competence and trustworthiness. It is important to demonstrate your dedication and commitment to hard work and empathy towards the community.

**SAFETY**

As in most developing countries, be aware of your valuables and the potential for pickpocketing. Violent crime is not common, but poverty can push people to do desperate things. If something does get stolen, contact the police. Typically, however, the locals will know who was the perpetrator and your items will be returned.

Do not walk alone at night, or into unknown areas. Life typically slows down when the sun sets.

**RE-ENTRY HOME**
Before you leave

- Gather the contact information of friends you would like to stay in touch with.
- Spend time reflecting on meaningful aspects of your trip: What did you learn?

When you come home:

- Be ready to experience boredom, isolation, disorientation and annoyance.
- Keep in touch with other team participants. Develop friendships with people that understand experiences of travelling to developing countries.
- Keep up to date with current events in your host country. Anything you do to maintain your connection with the world at large will solidify the significance of your trip.
- Remember that you can maximize your impact by inspiring and sharing your experience with others.

Participant Expectations

Project C.U.R.E. has been successful as an organization involved in the business of taking health and hope to the needy of the world. In this pursuit, Project C.U.R.E. carefully follows the strategies and methods of any good business while maintaining a fine balance between business considerations and an attitude of humanitarian kindness.

**PLEASE OBSERVE THE FOLLOWING EXPECTATIONS:**

- Project C.U.R.E. and the participants are donating supplies and equipment, as well as gifts to the hosts. Tipping will be taken care of by Project C.U.R.E.
- Project C.U.R.E.’s presence in a country should bring importance and influence to the in country host and facility. The opportunity to compliment the host as the reason for Project C.U.R.E.’s presence may be in front of peers and officials during discussions, meetings, hospital/clinic visitations or meeting with people of the media.
INCLUDED IN TRIP COSTS

Trip costs include in-country transportation, accommodations, translators, 3 daily meals, clean water and some activities as determined by the trip leader.

- Every effort is made to have all team participants travel together from the U.S. to the clinic country.
- Each participant is permitted to take 1 checked bag and 1 carry-on bag. IMPORTANT: Because participants will be carrying Project C.U.R.E. supplies, please only plan on packing one overhead carry-on item for your own personal items.
- Rooms are shared by two or more people of the same sex. Room assignments are determined by the Host or Team Leader. Private rooms may be requested for married couples.
- Culligan bottled water from a jug is provided every day and included in the trip costs. Alcohol is not included and will be billed separately and paid for by the individual.
- Any changes in air travel after the tickets are purchased may have fees charged by the airline. These charges shall be paid by the participant.
- Trip costs begin when the team arrive at the destination and terminate when the departing flight is boarded.

PROJECT C.U.R.E. PARTICIPANTS MUST ALWAYS:

- Display an attitude of availability and respect.
- Be flexible. A flexible attitude is the ‘name of the game’ and may involve graciously accepting itinerary changes, accommodation difficulties, surprise interviews, public speaking engagements, long hours, early mornings, late nights, bumpy rides, and many other unexpected events.
- Be professional in appearance, in conduct, in attitude and in the delivery of information. The image of the team will set a tone for others participating with the clinic efforts.
- Follow a professional dress code. Scrubs and Project C.U.R.E. T-Shirts are all appropriate.

TEAM EXPECTATIONS
• Clarify any questions about procedures at the host facility with the Trip Leader.
• At no time will a participant leave the group without the knowledge of the in country host or team leader.
• Provide support and encouragement to one another and staff at the host facility. Never promise or pledge specific treatment or obligate Project C.U.R.E. in any way.
• Never give the locals money or promise things. It sets unrealistic expectations for future trip participants and encourages dependencies.

ADDITIONAL NOTES

• While in-country working with severely underserved populations, it is possible to become focused on an individual situation. Always remember that there are hundreds of locations that can benefit from the medical assistance and political influence of Project C.U.R.E.
• Participants may never expect money or goods in exchange for favors or assistance in bypassing the standard needs assessment and container shipment procedure of Project C.U.R.E.

Safety

From the U.S. Department of State

For the latest security information, Americans traveling abroad should monitor the Department of State, Bureau of Consular Affairs’ website at http://travel.state.gov, where the current travel warnings and travel alerts, as well as the worldwide caution, can be found.

Up to date information on safety and security can also be obtained by calling 1-888-407-4747 toll free in the U.S. and Canada, or for callers outside the U.S. and Canada, a regular toll-line at 1-202-501-4444. These numbers are available from 8:00 a.m. to 8:00 p.m. Easter Time, Monday-Friday.

The Department of State urges American citizens to take responsibility for their own personal security while traveling overseas. For general information about
appropriate measures travelers can take to protect themselves, see the Department of State’s pamphlet “A Safe Trip Abroad,” on the website.

The loss or theft of a U.S. passport abroad should be reported immediately to the local police and the nearest U.S. Embassy or Consulate. If you are the victim of a crime while overseas, in addition to reporting to local police, please contact the nearest U.S. Embassy or Consulate for assistance.

U.S. citizens should carry a copy of their U.S. passport with them at all times. In the larger urban areas, ATM machines are usually available at major banks. However, travelers should exercise caution when using ATM, debit, and credit cards to avoid theft or fraud.

Travelers should bring sufficient cash for their trip if they will be spending time outside of the large cities.